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PSI Helpdesk




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# PSI Exam Accommodations

Welcome! You can raise a request for PSI Exam Accommodations using the options provided.

What can we help you with?


Test Accommodations Request
▾

Required fields are marked with an asterisk \*

Email confirmation to \*

Subject \*

Candidate First Name \*

Candidate Last Name \*

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Candidate Email Address \*

Candidate Phone Number \*

Have you registered for the exam? \*

Exam Name \*

Program

Where are you taking your exam? \*

Please read the Consent to Terms and Conditions below: \*




- We are committed to providing an equitable testing experience for all candidates. As part of our efforts, we may collect and process health information provided by you. This information will be used to arrange the necessary accommodations to support your testing needs, which include remitting payments to testing facilities and requesting payments from government and professional licensing agencies. By submitting your health information, you are providing consent for us to use it as described. Please note that if you do not consent to the use of your information for these purposes, we may be unable to arrange the necessary accommodations for your testing. For more detailed information on how we handle your personal data and to learn more about your rights, please refer to our Privacy Policy (<https://www.psiexams.com/en-gb/legal/privacy-policy/>)

Documents Uploaded \*

- Please confirm that you have uploaded all necessary documents (if applicable) for your accommodations request in the Attachments field below.

Description

Please enter the details of your request. A member of our support staff will respond as soon as possible.

Normal text ▾ **B** *I* ... ≡ ▾ A ▾ := ½=  </>  99 - 

Attachments

 Drop files to attach or [browse](#)

Send Cancel

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